Maternal Infant Health Program Quality Assessment

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Objectives



Understand how compliance and quality will be measured in Cycle 9.



Understand how compliance and quality work together to give a full picture of an MIHP provider.



Learn about quality domains.



Know what to expect between now and Cycle 9.

Overview

- ► Cycle 8 Compliance
 - Why changes made
 - What changes made
- Cycle 9 Quality and Compliance
 - Why changes made
 - What to expect





Compliance lives on paper.

Quality lives in process and in people!

- Compliance: Conforming to a rule.
- ► Compliance with MIHP: Alignment with standards presented in the Medicaid Provider Manual and MIHP Operations Guide and forms
- Quality: The degree of excellence of something.
- Quality within MIHP: Standardized agency practices that support the care beneficiaries receive as well as agency staff providing that care

Compliance	Quality
Provider must respond to all referrals for maternal beneficiaries within 14 calendar days after the referral is received.	Provider uses a variety of methods over an extended timeframe to contact families who are referred for services.
Beneficiary/caregiver's response to the visit interventions/issues must be documented.	Home Visitor uses beneficiary/caregiver's response to the visit interventions/issues
Beneficiary/caregiver's feedback regarding the visit must be documented.	Home Visitor uses feedback regarding the visit to plan for subsequent visits.

Maternal Infant Health Unit

Certification/Compliance Review

- Compliance with Medicaid policies and MDHHS standards
- Medicaid defines timelines
- Corrective Action Plans
- Decertification
- Requirements for billable
 visits done through OIG
 and MHP

Quality Assessment

- Comparison with best practices in home visiting
- Goes beyond MIHPspecific standards
- Quality Improvement Planning
- Collecting baseline data to inform MDHHS quality improvement strategy
- No standard in place, solely for the purpose of understanding agency practices

Cycle 9 Timeline

Cycle 9 begins June 1, 2022

January 2022-May 2022 Prepare June 2022-May 2023 Quality Assessment June 2023-May 2024 Compliance Review

Cycle 9 Documents Posted on MIHP Website January 1, 2022 Cycle 10 begins June 1, 2024

Session Overview Cycle 9 Timeline

Date	Activity
May 2021	Today – Update MIHP Coordinators
June 1, 2021	Begin revisions of Cycle 9 Operation Guide, MIHP Forms and Certification Compliance Tool
July – August 2021	Pilot Cycle 9 Quality Assessment Tool 8-10 agencies
August 3, 2021	Present Update on Cycle 9 Quality Assessment Tool draft with revisions based on the pilot sites that have been done
November 15, 2021	Final drafts of Cycle 9 revisions to MIHP team and quality advisory group for review
December 15, 2021	Final comments from MIHP team and Quality Advisory Group due
January 1, 2022	Draft Cycle 9 Quality Assessment Tool, Operation Guide and MIHP Forms on website – 30 Day comment period
February 1, 2022	Cycle 9 Quality Assessment Tool, Operation Guide and MIHP Forms Agency comments due to MDHHS
February 15, 2022	Final Cycle 9 Quality Assessment Tool, Operation Guide and MIHP Forms on MIHP website
May 2022	Coordinator Training – Present Review Cycle 9 Quality Assessment Tool and Draft Cycle 9 Certification Compliance Tool
June 1, 2022	Begin Cycle 9 Quality Assessment Tool implement Operation Guide and MIHP Forms

Prepare

- Cycle 9 documents posted for comment by January 1, 2022
- Providers will have 30 days to provide feedback on documents
- ► Final versions of Cycle 9 documents will be posted by February 15, 2022
- Cycle 9 protocols will be due April 1, 2022
 - Only new or updated protocols will be submitted for approval!
- New or Updated Documents to be posted
 - MIHP Operations Guide
 - Quality Assessment Specifications
 - MIHP Forms

Additional Information

- All providers will receive a <u>baseline</u> quality assessment between June 1, 2022 and May 31, 2023
- Certification Compliance Reviews will resume in June 2023 and occur for all agencies between June 1, 2023 and May 31, 2024.

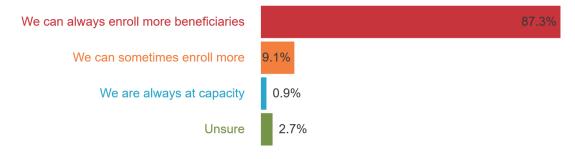
*If your agency's 36-month certification expires between June 2022 and December 2022, you will receive a Cycle 8 certification compliance review at that time as required my Medicaid policy. The Quality Assessment for these agencies will be scheduled in spring of 2023.

So...when you say you're looking at "quality metrics," what are you actually looking at?

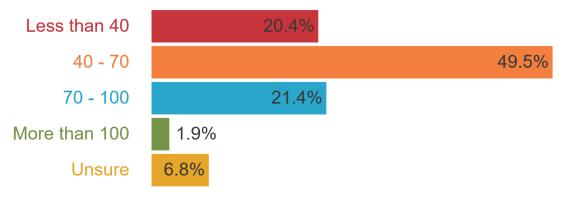
I'm glad you asked!

Let's go back (way back) to May 2020 (

At your current staffing level, does your agency have the capacity to take on additional beneficiaries?



What is the average beneficiary caseload for a full-time home visitor? For a part-time home visitor, indicate their caseload at 40 hr/wk. (10 hr/wk, 20 benes = 40 hr/wk, 80 benes)







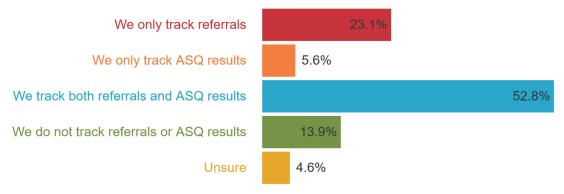
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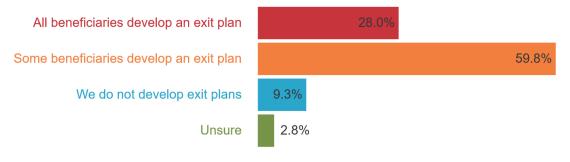


Let's go back (way back) to May 2020 C

Does your agency have a system for tracking referrals and/or ASQ results?



Do home visitors at your agency help beneficiaries who complete the program develop an exit plan? (ie. transition into another program, continued access to parenting support, etc.)









Direct ==

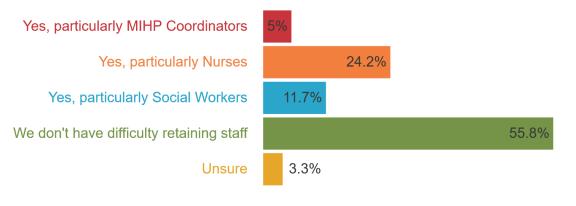


Let's go back (way back) to May 2020 C

How does your agency assess the quality of relationships between home visitors and beneficiaries? (select all that apply) **If "Something Different," indicate specifics in Q&A**



In your opinion, does your agency have a difficult time retaining staff? (select all that apply)

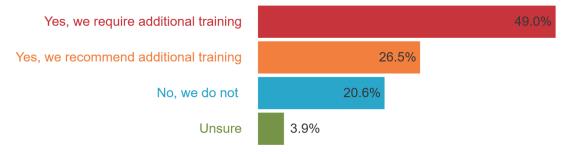




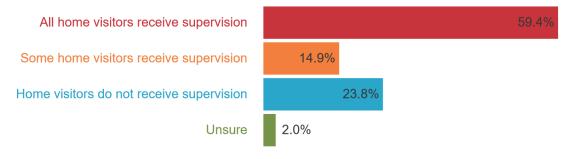


Let's go back (way back) to May 2020 C

Does your agency require or recommend training beyond that required by MDHHS?



Does your agency use a supervision model that reduces stress and improves performance of home visitors? (ie. reflective supervision)







Since Then



Quality Advisory Group



Independent Provider Focus Groups



Community Focus Groups



Review of alternative assessments



Review of the literature

Lessons Learned



There's so much we don't know about what you're doing!



Practices vary greatly across agencies



Community context has a lot to do with agency practices



Many quality assessment tools are available



The aspects of MIHP that make it unique also make it difficult to compare with other home visiting models

Michigan Home Visiting Quality Assessment System (MHVQAS)

What is the MHVQAS?

What do we mean by an "adapted version"?

Why are we using the MHVQAS?

Quality Domains

Recruitment & Enrollment

Home Visitor & Supervisor Caseloads

Assessment of Family Needs and Referral to Services

Dosage & Duration

Home Visit Content

Health Equity

Staff Qualifications & Supervision

Professional Development

Organizational Structure & Support

IMPORTANT!

Most agencies will not have everything we are asking for and that is okay! We are not expecting you to and there will be no negative implications.



Why do we want to know this?



Understand what is happening to know where to focus improvement efforts



Highlight strengths of MIHP as a whole



Understand MIHP as a piece of the home visiting environment in Michigan

Process (subject to change)



DOCUMENT SUBMISSION



STAFF SURVEY



ADMINISTRATIVE DATA ANALYSIS



COORDINATOR INTERVIEW



INTERNAL ANALYSIS



POST-ASSESSMENT MEETING



What's Next?



Pilot: July – August

Interested? Email me! ostyns@michigan.gov



Process and content edits, as necessary



Posted January 1st for public comment



Scheduling will begin spring 2022



Reviews will occur first full year of Cycle 9 with plans to complete first year of each Cycle.

In the meantime...



If you have questions, please email them to MIHP@Michigan.gov

indicate "quality" in the subject line

- We will answer questions in the Quality Corner of the MIHP Weekly Update
 - Remember! If you're interested in participating in the pilot and offering feedback on the process, please let me know!

Thank you for your continued commitment to providing quality services to families!